SUBMIT: COMPLETED APPLICATION, TAX Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

Dafund.	Amount Paid:	Date:	Permit #:
		6.08-18	15-000-1

(we) declare that this app	Socretarial Staff	NOT 23	9	Dan's for legist	Municipal Use	`		Commercial Use				Residential Use			Proposed Use) -	Proposed Construction:	Fyleting Structure: If permit being applied for is relevant to it)		טר			^ -		material	Value at Time of Completion * include * mediate * mediat	☐ Non-Shoreland		☐ Shoreland ——	Cre	Section /		S₩ 1/4, SE	PROJECT LOCATION Legs	NOSON D	Agent:	Contractor:	Address of Property:	Rold (TYPE OF PERMIT REQUESTED—P Owner's Name:	DO NOT START CONSTRUCTION OWER ALL FERRING HAVE LIGHT CAMITADY
FAILURE FACTORIAN OF AILURE IICATION (Including any accomp	2ff Condition				\downarrow		Mobile	1					\perp	Principa			in:	permit being applied i		Property	Run a Business on	Conversion	☐ Addition/Alteration	New Construction		Project			s Property/Land withi	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	Township 2	1	1/4 Gov't Lot	Description	かってく	(Person Signing Application on behalf of Owner(s))		· ~ -	overty forest	TED-P LAND USE	ORIH REFERENCE OF THE
OBUITION A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT WITHOUT	Other: (explain)			>	Accessory Building (specify)	Addition/Alteration (specify)	Mobile Home (manufactured date)	with Attached Garage	with (2) Deck	with a Deck	with (2 ^{na}) Porch	with a Porch	with Loft	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)				or is relevant to it)		☐ Foundation		☐ Basement	☐ 1-Story + Loft	1-Story		# of Stories and/or basement		100	Lake,	iver,	N, Kangevv	١	Lot(s)	(Use Tax Statement) 04-	PIN: (Contra		1	III OAN	HIGE G CANITARY
TARTING CONSTRUCTION Examined by me (us) and to to ding and that it will be relied		Renumber of		/Alteration (specify)	y)	y)	date)	arage						g shack, etc.)	the opposite	Proposed Structure	Length:	Length:					□ Year Round	í		Use		If yescontinue ->	nd or Flowage	Stream (incl. Intermittent) If yescontinue	15Ay fi	Town of:	Vol & Page	625105	23 digits)	Agent Phone: Ag	ne:	Bay End	0 pax 44	Address:	DRIVY
WITHOUT A PERMI he best of my (our) kno upon by Bayfield Coun		2×12 1/2		γ)				or cooking &								re					□ None		2 6	3 F	•	# of bedrooms			Distance Structu	Distance Structure	210			13403000		ent Mailing Addres	Plumber:	73	S W.	City/State/Zip	CONDITIONAL USE
T WILL RESULT IN PE wledge and belief it is tr ity in determining wheth		Operation			200			food prep facilities)									Width:	Width:	i'i soile	Compost follet				(New) Sanitary	188	What Sewer/San Is on the			Distance Structure is from Shoreline:	re is from Shoreline :			Block(s) No. Si	┼	73	Agent Mailing Address (include City/State/Zip)	1	H1845	SL burn H	zip:	SE SPECIAL USE
NALTIES ue, correct a ner to issue a		_	_	-	-	-			_	_		+	+		_	-				jet	18	r Vau	ts Spec	1	₹			reet	ne:	Ä		Lot Size	Subdivision:	Volume	Recorded D	•••			MI SY	1	
nd complete. I (we) acki permit. I (we) further a	×	×)	×	×	×	×	X)	×	×	×	× >	× ×	×	×	×	Dimensions	height	Height:			contract)	Vaulted (min 200 gallon)	ify Type:	Specify Type:		Type of ittary System property?			□ Yes	Is Property in Floodplain Zone?	10	Acreage		27 Page	Document: (i.e. Property Ownership)	Written A Attached	riamber rione.		S4844 Cell Phone:	Tele	□ B.O.A. □ O
nowledge that I (we) accept liability which																Square Footage						lon)			□ City	Water			_ □ Ves	Are	\dashv \mid C	> %		(s) -474 (s)	erty Ownership)	Written Authorization Attached Yes No	riione.	Phone:	Ü	. · ·	OTHER

Attach
Copy of Tax Statement
F you recently purchased the property send your Recorded Deed

Authorized Agent:

are signing on

behalf of the owner(s) a letter of authorization must accompany this application)

od All Owners must sign or letter(s) of authorization must accompany this application)

Date

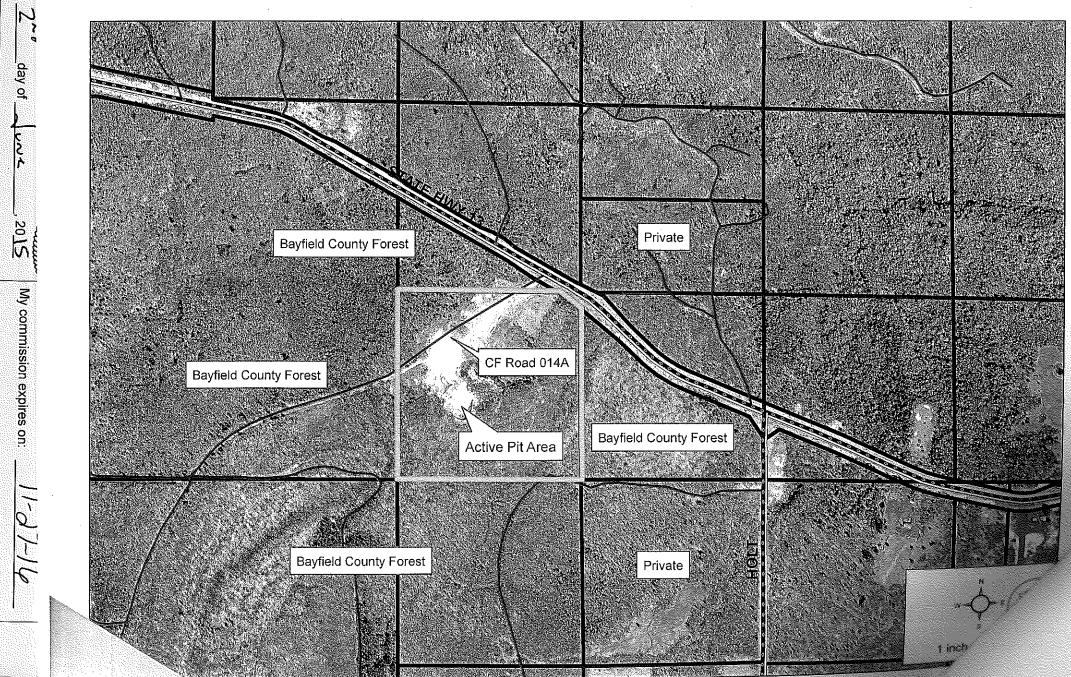
Date

(If there are Multible Owners listed on the De

Address to send permit

Jow: Draw or Sketch your P	Jow: Draw or Sketch your Property (regardless of what you are applying for)	are applying for)	
(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Front All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field I (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	d/or (*) Privy (P)
Please complete (4) – (7) shows (criterto	to continuing)		
(8) Setbacl	the closest point)	Changes in plans must be approve	pproved by the Planning & Zoning Dept. Measurement
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	ad Feet	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek	
Setback from the North Lot Line			
Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	Feet Feet Feet	Setback from Wetland 20% Slope Area on property Elevation of Floodplain	Feet Feet
Setback to Septic Tank or Holding Tank Setback to Drain Field	Feet Feet	Setback to Well	Feet
Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimum required other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (3) Prior to the placement or construction of a previously surveyed corner to the other previously surveyed corner, or verifiable by the Depart marked has a frenced surveyer at the owner's expense.	Feet en (10) feet of the minimum required setback, i resyor at the owner's expense. ran ten (10) feet but less than thirty (30) feet for yed corner, or verifiable by the Department by	Setback to Privy (Portable, Composting) Feet Prior to the placement or construction of a structure within ten (10) feet of the minimum required serback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to to other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Frior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required serback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the proposed site of the structure, or must be marked by a line from the minimum required serback, the boundary line from which the setback must be measured must be visible from the proposed site of the proposed site of the structure, or must be marked by a line from a known corner within 500 feet of the proposed site of the structure, or must be marked that a line of the proposed site of the structure, or must be	t be visible from one previously surveyed corner to the the setback must be measured must be visible from of the proposed site of the structure, or must be
(9) Stake or Mark Propose NOTICE: All Land For The Construction Of I	d Location(s) of New Construction of New Const	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W), NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	<u>ank (HT), Privy (P)</u> , and <u>Well (</u> W). s not begun. form Dwelling Code.
Permit #: /<_/> Permit #: /	Reason for Denial:	\$ \frac{7}{1}	
sub-Standard Lot Imon Ownership Non-Conforming	☐ Yes (Deed of Record) ☐ Yoo ☐ Yes (Fused/Contiguous Lot(s)) ☐ No ☐ Yes		Affidavit Required (1) Yes (1) No Affidavit Attached (1) Yes (1) No
1 Mar. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Previously Gramted by Variance (B.O.A.)	- #
lly Created Delineated	Oyes ONO A	Were Property Lines Represented by Owner Was Property Surveyed	Zoning District (F.2)
Date of Inspection: 77 6 Inspection 77 6 Inspection 6 17 17 18 18 18 18 18 18	⊝ected b	Occor Ball Mulphy no-lif No they need to be attached.) Respectively.	Date of Re-Inspectio
Signature of Inspector:			Date of Approval:
	Const.	Hold For Affidavit:	V Inspector Notes

Sand River Pit Aerial Photo and Area Extent Map



Drafted by: Bayfield Co Planning & Zoning Dept / (RDS/dak-6/1/15-2:43pm) k/affidavit/#5may/bayfieldcountyforestry

Planning and Zoning Committee at the meeting does <u>not</u> authorize the beginning of unst first obtain land use application/permit card(s) from the Zoning Department.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN

ENTERED Permit #: Date:

Amount Paid: \$6.95 On 000

Refund:

APR 09 2015

9,600	`				The state of the s	plain)	Other: (explain)	Staff	58CI연[a/la] S[a] Other: (explain) 1
9,600	×				1,000	Conditional Use: (explain)	Condition		
	× (20)	28	Building		ACIAL STORAGE	Special Use: (explain) Communcia	Special Us		W 25 25 2
	×		100)	lteration (specify	Þ	Accessory	370	
	×)					Ruilding (specify)	Accessory Building		☐ Municipal Use
	×				-/	Addition (Alteration (specify)	Addition/		
	×					me (mapufactured dat	Mobile U		
	×	les) (& food prep facilities)	or 🗆 cooking	sleeping quarters,	Runkhouse w/ (sanitary or sleeping quarters.	Bunkhous	7	
	×)ge	with Attached Garage	***	Ď	Commercial like
two.	×	-	7,150			with a Deck			
	× >			A distance of the second of th	and the state of t	with (2") Porch			
	×××					with a Porch		ID	Residential Use
	×		A TOTAL CONTRACTOR OF THE PROPERTY OF THE PROP			with Loft			
	×				nack, etc.)	Residence (i.e. cabin, hunting shack, etc.	Residence		
	×				re on property)	Principal Structure (first structure on property)	Principal S		
Square	Dimensions	Din		Ď	Proposed Structure	P		•	Proposed Use
			80000	0	Lengun: / 1.			on:	Proposed Construction:
2	Height:	**	0)]		ing applied for	if permit be	Existing Structure: (If permit being applied for is relevant to it)
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n)	/aulted (min 200 gallon)	or Vault				□ Basement	isting bldg)	Relocate (existing bldg)	110000
	'Type:	(2)	1 1	□ 3		2-Story		☐ Conversion	
₩ Well	Type:	tary Specify Type:	□ (New) Sanitary	□ 2		1-Story + Loft	š	Addition/Alteration	
☐ City		City	☐ Municipal/City	□ 1	□ Seasonal	■ 1-Story		New Construction	material 🗽
Water	Type of tary System property?	What Type of Sewer/Sanitary Sy Is on the propert	Sew 's	# of bedrooms	Use	# of Stories and/or basement		Project (What are you applying for)	e Ön de
7:1									Off-Directions
					1	44			Non-shoreland
	X No	eline :	cture is from Shoreline : fee	Distance Structure	Pond or Flowage	Is Property/Land within 1000 feet of Lake, Pond	/Land within 1	ls Property	Shoreland —▶ □
Are Wetlands Present?	Is Property in Floodplain Zone?	#	cture is from Shoreline :	Distance Structure	incl. intermittent)	☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue—▶	/Land within 3 dward side of I	Is Property reek or Land	
	7.7			3	BAYLIE			, rowinging	fa
)	Teag.	Lot Size			-14	N Range of W	3	Township	7 7
		Subdivision:	Block(s) No.	Lot(s) No.	Vol & Page	Lot(s) CSM	Gov't Lot	5 1/4	S & 1/4, N
Page(s)	10 Page(s	Volume	12/80	2	N	(Use Tax Statement) PIN: (23 digits) 04- 006 -		Legal Description:	PROJECT Le
No No	□ Yes □ No	Baseled Day							(
Written Authorization	Written Aut	tate/Zip):	Agent Mailing Address (include City/State/Zip):	ent Mailing Add		Owner(s)) Agent Phone:	ation on behalf of	erson Signing Applic	Agent: (Pe
hone:	Plumber Phone:			Plumber:	Contractor Phone: Plu	Contract	* W	AN ANY	BHS95 STATE
Cell Phone: 7/5-292-7578	7/5-29				City/State/Zip:	City/Stat			Address of Property:
28.82	715-779-3645	かること	5	2					Water P.
OTHER	B.U.A. UI	SPECIAL USE	5 (3.5)	CONDITIONAL USE 🔏	WY □	□ SANI	☐ LAND USE	ESTED— ▼	TYPE OF PERMIT REQUESTED—▶

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed Owner(s):

listed on the Deed All Own

sign or letter(s) of authorization must

accompany this application)

Date

5-15

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization

Address to send permit PU

Box

1

BANLie

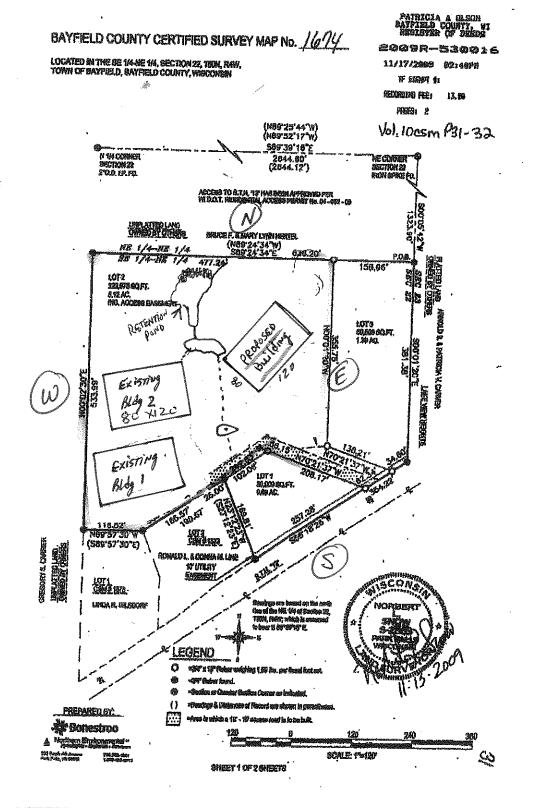
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54814

application)

Date

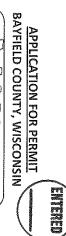
@aJanuary 2012	Hold For Sanitary: Hold For JeA.	Signature of Inspector:		Condition(s): Town, Committee or Board Conditions On the Conditions		arcel Legally Created Iding Site Delineated		Lot	Permit#: S-008	Issuance Information (County Use Only) Permit Denied (Date):	(9) Stake or Wark Proposed Lt NOTICE: All Land Use For The Construction Of New The	Prior to the placement or construction of a structure more than te one previously surveyed corner to the other previously surveyed or marked by a licensed surveyor at the owner's expense.	Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimum re other previously surveyed corner or marked by a licensed surveyor at the owner's expense.	Setback to Septic Tank or Holding Tank Setback to Drain Field	Setback from the East Lot Line	Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	(8) Setbacks: (measured to the closest point)	Please complete (1) – (7) above (prior to co	?			Show any ().	(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	7
	Hold For Affidavit:	Control of the Contro	人とは、一般には、	Attached? Yes No.	Inspected by:	O No	Pr	(Deed of Record) X No (Fused/Contiguous Lot(s)) X No Mitigatio Mitigatio	Permit Date: 625-15	Sanitary Number:	ocation(s) of New Construction, Septic I at e Permits Expire One (1) Year from the Date or One & Two Family Dwelling: ALL Municipalit local Town, Village, City, State or Federal age	n (10) feet but less than thirty (30) feet from the minimum rorner, or verifiable by the Department by use of a corrected	AJA Feet	N/A Feet Setback	Feet	50 Feet Setback from 120 Feet Setback from		Measurement	e closest point)	attalhad Illia continuing)	•			Metialias, of () supples over 20/0	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Westlands: or (*) Stones over 20%	erty (regardless of what you are applying for
D	Hold For Fees:	De		The they need to be attached.) The second of the second o	Y X	nes Represented by Owner Was Property Surveyed	#	Xio		# of bedrooms:	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	r construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be reveror at the owner's expense.	undary line from which the setback must be measured must be visible from	k to Well	loodplain	Setback from Wetland Setback from 20% Slope Area	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	Description	Citality and Second Sec			á				<u>or</u>
and Signature	Inspectors !	Date of Approval: 16-24-		724	Zoning District (LCP) Lakes Classification (LCP) Date of Re-Inspection:			Affidavit Required Yes No Affidavit Attached Yes		Sanitary Date:	rivy (P), and <u>weil</u> (w). n. ling Code.	d site of the structure, or must be	ole from one previously surveyed corner to the	Feet	6 24 5 Feet	+25 Feet	Feet Feet	Measurement	ca by air i manning a rouning or be				DATE (FOR E)		(*) Privy (P)	

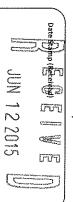




SUBMIT: COMPLETED APPLICATION, TAX

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138





INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Bayfield Co. Zoning Dept

Refund:	Amount Paid:	Date:	Permit #:
	475	6:30 10	15-0083

Owner's Name:
MICHREL

MICHREL

Address of Property; TYPE OF PERMIT REQUESTED | LAND USE | SANITARY | PRIVY | CONDITIONAL USE | SPECIAL USE | Owner's Name:
| MICHAEL B. GUSTAFSON | D.O. 867 961 | Bayfield William Control of the City/State/Zip: | ☐ Shoreland Authorized Agent: Contractor: めどだめ PROJECT Section (1) 47) Sty. 5011 Legal Description: (Use Tax Statement) ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage
If yes.--continue ☐ Is Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain? If yes--, Township 50 彸 Hey **HOU** Gov't Lot ehalf of Ow _ N, Range w 200 PIN: (23 digits) City/State/Zip: Bay Pod 4 ٤ Contractor Phone: Agent Phone: If yes--continue J. Town of Bay field Vol & Page からようすのすのかっか nittent) ¥ Plumber: Agent Mailing Address Distance Structure is from Shoreline: Distance Structure is from Shoreline : feet K CO Lot(s) No. 54814 7 Block(s) No. PLOCED Lactument: (i.e. Property Ownership) Lot Size Subdivision: MBHS ls Property in Floodplain Zone? □ Yes B.O.A. No 774.3085 Written Authorization
Attached
Yes No 292-1741 Plumber Phone: Telephone: Acreage Page(s) □ OTHER Are Wetlands
Present?

Ves N N

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
	☐ New Construction	X 1-Story	☐ Seasonal	 <u>}_</u>	☐ Municipal/City	□ City
ሱ	Addition/Alteration	☐ 1-Story + Loft	Year Round	□ 2	☐ (New) Sanitary Specify Type:	X Well
1	☐ Conversion	☐ 2-Story		X 3	☐ Sanitary (Exists) Specify Type: 47	
· · · · · · · · · · · · · · · · · · ·	☐ Relocate (existing bldg)	☐ Basement		<u> </u>	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
J.	☐ Run a Business on	No Basement		□ None	□ Portable (w/service contract)	
1	Property	□ Foundation			☐ Compost Toilet	
		27/2 1			□ None	

Proposed Construction

Length:

Width:

Height:

	x)	Other: (explain)	Secretarial Staff
	х)	Conditional Use: (explain)	(
	x)	Special Use: (explain)	
,			\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	×)	Accessory Building Addition/Alteration (specify)	Rec'd for Issuance
	×	Accessory Building (specify)	
120	10' ×12')	Addition/Alteration (specify) 10'X 12' ENTY / MUD ROUM	, , ,
	×	Mobile Home (manufactured date)	
	×	Bunkhouse w/ (\square sanitary, <u>or</u> \square sleeping quarters, <u>or</u> \square cooking & food prep facilities)	
	×	with Attached Garage	Commercial Use
•	x)	with (2 nd) Deck	
	×)	with a Deck	
	x)	with (2 nd) Porch	
	×)	with a Porch	Residential Use
	×)	with Loft	
	х)	Residence (i.e. cabin, hunting shack, etc.)	
	×	Principal Structure (first structure on property)	
Square Footage	Dimensions	Proposed Structure	Proposed Use

FAILURE TO OBTAIN A PERMIT OUT STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) (we) are examined by me (us) and to the bast of my (our) knowledge and belief it is true, correct and complete, I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable three for the purpose of inspection.

Authorized Agent: Owner(s): (If the the Deed All Owners Mardelle TARALLE A. Must Harry must sign or letter(s) of authorization must accompliny this application)

Date

Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit Custy + Sol

If you recently 54814 Attach

Copy of Tax Statement

Purchased the property send your Recorded Deed

Date (St. 1) Letter of authorization must accompany this application)	FAILURE TO OBTAIN A PERMIT IOUS INC. TWO was part to the best of my (our) knowledge and belief it is true, our ling any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is us, our accompanying information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue are currently of all information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering (and on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering (and on the purpose of inspection.	PARTIAL STATE Other: (explain) Statemen to LAKS	JUN 3 0 2015 (explain) (x)		Alteration (specify)	ate)	☐ Commercial Use with Attached Garlage (X)	with (2 nd) Deck	with Loft (hunting shack, etc.)	Proposed Structure	dion: Length: YO X 7 & CPA	it being applied for is relevant to it) Length:	O None	☐ Relocate (existing bidg)	Alteration 1-5tory 1 3 3 3 Sanitary (Exists) Spe	☐ New Construction ☐ 1-Story ☐ Seasonal ☐ 1 ☐ (New) Sanitary Spec	bedrooms	□ Non-Shoreland	r Flowage Distance Structure is from Shoreline: -continue - 195 + feet Servo	s from Shoreline : Is Property in feet Floodplain Zone?	1.3	1/4 Gov't Lot (s) CSM VOI & Page Cov't Lot Size Lot Size Acree	digits) -2-50-04-23-3-00-137-100 Volume 1037	gent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Agentes Include 1975 Agent Mailing Agent Mailing Agentes Include 1975 Agent Mailing	CHEQUAMERSON BY Contractor Phone: Plumber: One of the Charles of	DATE OF CITY/State/Zip:	TEAS Mailing Address: Mailing Address: DECLARK TEXAS	*ERMITS HAVE BEEN ISSUED TO APPLICANT. HOW DO I FILL OUT THIS AFFECIAL USE GENERAL SANITARY PRIVY CONDITIONAL USE SPECIAL USE	Bayfield Co. Zoning Dept.	1 2 2 2015 W	BAYRIELD COUNTY, WISCONSIN Date: Date: Amount Paid:	ENTERED Permit #:	
Attach	Twe further accept liability which the ordinances to have offices to the only ordinances to have offices to the only ordinances.	akno \	× 200	×							Hootage		Height:					Water Sch			perty in Are Wetlands ain Zone? Present? Yes Yes	1.360	û	Page(s) 515	Attached Yes © No (i.e. Property Ownership)	Written Authorization	plumber Phone:	715 779 3866 Cell Phone:	OTHER_	// [Invited Land Carrett	づら 「「「「」	1,0991	# 2703

CAMPBELL